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FEC FORM 3

FE5AN018

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIV SECRETARY CI PUBLIC RECO OS JUL 15 PM 12: 55

(Revised 02/2003)

			-	L Of	Office Use Only	
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	enampie.	Example: If typing, type over the lines.		12FE4M5	
Braley for Iowa						
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ADDRESS (number and street)	PO Box 856					
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Check if different than previously.		<u> </u>	1111	<u> </u>	<u> </u>	
reported. (ACC)	Des Moines					
2. FEC IDENTIFICATION N		<u> </u>				
2. FEC IDENTIFICATION N	UMBER ▼ 	CITY A		STATE	ZIP CODE	
C C00541417	3	IS THIS			STATE ▼ DISTRICT	
<u> </u>		REPORT	NEW (N) OR	AMENDED		
				(A) 	A COO	
4. TYPE OF REPORT (Cho	pose One)	10.5				
(a) Quarterly Reports:	(b)	12-Day PRE-Election	Report for the	:		
April 15 Quarterly Re	eport (O1)	Primary	(12P)	General (12G)	D	
					Runoff (12R)	
July 15 Quarterly Re	port (Q2)	Convent	tion (12C)	Special (12S)		
October 15 Quarterly	/ Report (O3)	M	M / D D	/ 	7 7 7 7 7	
	1	Election on		<u></u>	in the State of	
January 31 Year-End	Report (YE) (c) 3	0-Day POST- Election	Report for the	•		
		General	,	a		
Termination Report (T	(FD)	C Certeral	(30G)	Runoff (30R)	Special (30S)	
is in a second troport (1	1	M M N	, <u>a</u> , a	<u> </u>	in the	
		lection on			State of	
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[MVM]	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	الشيميشير المساهدية				
5. Covering Period 05"	15 20		n 06	/ B / B / Y Y	7 Y Y	
Gertify that I have examined this F	Report and to the best	t of my knowledge ar	nd belief it is tri	ue correct and compl		
pe or Print Name of Treasurer	Theresa L Kehoe			e, comoct and comple	ete.	
5						
Signature of Treasurer Theresa I	L Kehoe		5	07 / 10	0 / 70777	
NOTE: Submission of the						
MDTE: Submission of false, erroneous Office	, or incomplete informa	tion may subject the p	person signing th	nis Report to the penalti	ies of 2 IISC 8407~	
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Only			í l	FEC	FORM 3	